



Certification of Mailing  
I hereby certify that I have reasonable basis to expect that, on the date shown below, this correspondence is being mailed or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

Carl J. Roof 37,708  
Name Registration No. (if applicable)  
Signature  
03-29-05  
Date

aw \$1621

IN THE UNITED STATES PATENT & TRADEMARK OFFICE  
RESPONSE/AMENDMENT

Mail Stop Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:

Application No. : 09/554,211  
Applicant(s) : Kenneally, et al.  
Filed : May 10, 2000  
Title : A PROCESS FOR MAKING HIGH PURITY LOWER  
ALKYL ESTERS  
TC/A.U. : 1621  
Examiner : Deborah Carr  
Conf. No. : 6519  
Docket No. : 6934  
Customer No. : 27752

1. ☐ No additional fees (claims fees or extension fees) are known to be required.
2. ☐ The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA*	RATE	FEE
TOTAL	* 29	MINUS	** 39	= 0	x \$ 50 =	\$0
INDEP.	* 5	MINUS	*** 7	= 0	x \$200 =	\$0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$360 =	\$0
					TOTAL	\$0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.

\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

3. ☒ The Commissioner is hereby petitioned under 37 CFR §1.136(a) to grant any extension of time needed for timely response to the Office Action dated 12/2/2004 in the above-identified application to preserve pendency of said application. The processing fee under 37 CFR §1.17 has been determined as follows: \$120.00 for a one-month extension of time.
4. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.
  - a. ☒ Any patent application processing fees under 37 CFR §1.16.
  - b. ☒ Any patent application processing fees under 37 CFR §1.17.
5. The Director is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.

04/07/2005 SHASSEN1 00000022 162480 09554211

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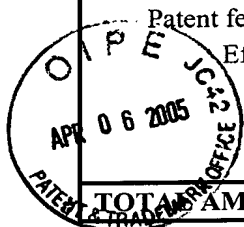
THE PROCTER & GAMBLE COMPANY

By

Carl J. Roof

Carl J. Roof  
Registration No. 37,708  
(513) 634-5209

March 29, 2005



# FEE TRANSMITTAL

for FY 2005

Patent fees are subject to annual revision.  
Effective December 8, 2004

## Complete if Known

Application Number	09/554,211
Confirmation Number	6519
Filing Date	May 10, 2000
First Named Inventor	Kenneally, et al.
Examiner Name	Deborah Carr
Art Unit	1621
Attorney Docket No.	6934

TOTAL AMOUNT OF PAYMENT (\$120.00)

## METHOD OF PAYMENT

1. ☒ The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:

Deposit Account Number: 16-2480

Deposit Account Name: The Procter & Gamble Company

## FEE CALCULATION

2. **BASIC FILING FEE - Large Entity**

Application Type	FILING FEE	SEARCH FEE	EXAMINATION FEE	Fee Paid
Utility	(\$300)	(\$500)	(\$200)	(Total = \$1000) <input type="checkbox"/>
Design	(\$200)	(\$100)	(\$130)	(Total = \$430) <input type="checkbox"/>
Reissue	(\$300)	(\$500)	(\$600)	(Total = \$1400) <input type="checkbox"/>
Provisional filing fee				(Total = \$200) <input type="checkbox"/>

3. **APPLICATION SIZE FEE:**

Sheets of Spec and Drawings ☐  
(250 for each 50 sheets in excess of 100, except for sequence and program listings)  
SUBTOTAL (2)+(3) (\$)[0]

4. **EXTRA CLAIM FEES FOR UTILITY AND REISSUE:**

	Extra Claims	Fee from Below	Fee Paid
Total Claims <input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/>	=	<input type="checkbox"/>
Independent Claims <input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/>	=	<input type="checkbox"/>
Multiple Dependent claims:	<input type="checkbox"/>	=	<input type="checkbox"/>

\*\* or number previously paid, if greater; For Reissues, see below

### Fee Description

Claims in excess of 20 (\$50 per claim)

Independent claims in excess of 3 (\$200 per claim)

Multiple dependent claim, if not paid (\$360)

\*\*Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim)

\*\*Reissue claims: each claim over 20 and more than original patent (\$50 per claim)

SUBTOTAL (4) (\$)[0]

## FEE CALCULATION (continued)

5. **ADDITIONAL FEES**

Fee Description	Fee Paid
Extension for reply within 1 <sup>st</sup> month	(\$120) <input checked="" type="checkbox"/>
Extension for reply within 2 <sup>nd</sup> month	(\$450) <input type="checkbox"/>
Extension for reply within 3 <sup>rd</sup> month	(\$1,020) <input type="checkbox"/>
Extension for reply within 4 <sup>th</sup> month	(\$1,590) <input type="checkbox"/>
Extension for reply within 5 <sup>th</sup> month	(\$2,160) <input type="checkbox"/>
Information Disclosure Statement fee	(\$180) <input type="checkbox"/>
37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>
37 CFR 1.17 (q) Missing Parts (provisional)	(\$50) <input type="checkbox"/>
Non-English specification	(\$130) <input type="checkbox"/>
Notice of Appeal	(\$500) <input type="checkbox"/>
Filing a brief in support of an appeal	(\$500) <input type="checkbox"/>
Request for oral hearing	(\$1,000) <input type="checkbox"/>
Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370) <input type="checkbox"/>
Other:	<input type="checkbox"/>

SUBTOTAL(5) (\$) [120]

## SUBMITTED BY

Name (Print/Type)

Carl J. Roof

Registration No.

37,708

## Complete (if applicable)

Telephone

(513) 634-5209

Signature

Carl J. Roof

Date

03/29/2005

This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.